UTILITY PATENT APPLICATION

City

Country

Washington

U.S.A.

State

Telephone

Attorney Docket No. Total Pages 2469-107A

First Named Inventor or Application Id

Zip Code

Fax

20004

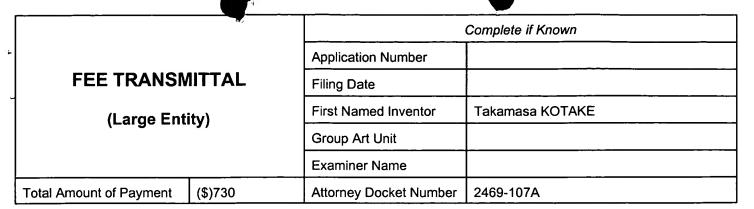
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TRANSMITTAL	Takamasa KOTAK	E	35.8 55.8
(Onty for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Labe	No.	25
APPLICATION ELEMENTS APPLICATION ELEMENTS APPLICATION ELEMENTS		DRESS TO:	Assistant Commissioner of Patents Box Patent Application Washington, D.C. 20231
a. [X] Newly executed (original of the light	e processing) s [17] y) colications ored R&D ix al Sheets) [6] al Pages) [4] or copy) on cox 17 completed) cox 17 completed) deleting fror application, d 1.33(b) sole if Box 4b is the prior ne oath or 4b, is sclosure of is hereby	Nucleotide (if applicable a. [] Co b. [] Pale c. [] Sta ACCOM [X] Assign [] 37 CFF (when [] Power [] English [[] English [[] Small Is [] Statem Status [[] Certification (if foreity) [] Other:	and/or Amino Acid Sequence Submission le, all necessary) mputer Readable Copy per Copy (identical to computer copy) stement verifying identity of above copies IPANYING APPLICATION PARTS Inment Papers (cover sheet & document(s)) R 3.73(b) Statement there is an assignee) of Attorney In Translation Document (if applicable) nation Disclosure Statement /PTO 1449 s of IDS Citations nary Amendment In Receipt Postcard (MPEP 503) If the specifically itemized) Entity Statement(s) Interest Idea in prior application, still proper and desired ed Copy of Priority Document(s). Ign priority is claimed)
17. If a CONTINUING APPLICATION, che [] Continuation [] Divisional			requisite information: f prior application No.:
	3. CORRESPONDEN	<u> </u>	· · · · · · · · · · · · · · · · · · ·
[] Customer Number or Bar Code Label	. JOINTED ONDER		or [X] Correspondence address below
	(Insert Customer No. or Attach	bar code label her	
Name Vincent M. Del	uca, Reg. No.	32,408	
Address Rothwell, Figg, Ernst &			

D.C.

202-783-6040



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 [X]The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck

[X]Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17

- [] Charge for the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance
- 2. [X]Payment Enclosed: Check

FEE CALCULATION

1. FILING FEE

	Fee	Fee
Fee Description	Code	Paid
[X]Utility Filing Fee	101	690
[] Design Filing Fee	106	310
[] Plant Filing Fee	107	480
[] Reissue Filing Fee	108	690
[] Provisional Filing Fee	114	150

SUBTOTAL \$690

2 CLAIMS

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FEE CALCULATION (continued)

Fee Description

3. ADDITIONAL FEES

[] Surcharge - late filing fee or oath	105	130
[] Surcharge - late provisional filing fee or cover sheet	127	50
[] Non-English specification	139	130
[] For filing a request for reexamination	147	2,520
[] Requesting publication of SIR prior to Examiner action	112	920
[] Requesting publication of SIR after Examiner action	113	1,840*
[] Extension for reply within first month	115	110
Extension for reply within second month	116	380
[] Extension for reply within third month	117	870
[] Extension for reply within fourth month	118	1,360
[] Extension for reply within fifth month	128	1,850
Notice of Appeal	119	300
[] Filing a brief in support of an appeal	120	300
[] Request for Oral Hearing	121	260
Petition to institute a public use proceeding	138	1,510
[] Petition to revive -unavoidable	140	110
[] Petition to revive - unintentional	141	1,210
[] Utility issue fee (or reissue)	142	1,210
[] Design issue fee	143	430
[] Plant issue fee	144	580
[] Petitions to the Commissioner	122	130
[] Petitons related to provisional applications	123	50
[] Submission of Information Disclosure Statement	126	240
[X] Recording each patent assignment per property	581	40
(times number of properties)		
[] Filing a submission after final rejection (37 CFR .129(a)) 146	690
[] For each additional invention to be examined	149	690
(37 CFR 1.129(b))		
Other fee (specify)		

Other fee (specify)

[]

Fee Paid

SUBTOTAL \$

* Reduced by Basic Filing Fee Paid

SUBTOTAL

\$40

Fee

Code

Fee

Paid

SUBMITTED BY				Complete (if applicable)		
NAME AND REG. NUMBER	Vincent M. DeLuca, Reg. No.	32,4	108	•		
SIGNATURE	Vincent M De Luca	DATE	6/2/00	DEPOSIT ACCOUNT USER ID		